STATE OF WISCONSIN, CIRCUIT CO	URT,		COUNTY	For Official Use
IN THE MATTER OF THE CONDITION	I OF	Statement of Emergency Deten Law Enforcement	tion by	
Name of Subject				
		Case No.		
Date of Birth				
<ul> <li>File this statement with the determine held within 72 hours of detention</li> <li>Please print or type all information</li> </ul>	n. (In Milwaukee	County file this stateme		
I am a law enforcement officer and hav  • The subject is mentally ill, drug dep  • The subject evidences behavior what was set forth in §51.15, Wisconsin S  My belief is based on specific and receive me or reliably reported to me as state	oendent, or develo nich constitutes a s Statutes. nt dangerous acts	pmentally disabled. substantial probability of ph		
Dangerous Behavior: When:				
Where:				
Describe Behavior:				
Witnesses to the demonstrate help view (	n alvelin a afficana v		☐ See att	ached page.
Witnesses to the dangerous behavior (i	Telephone	Addres	S	Relationship
The subject was detained at	Name o	f §51.15(2) Facility		
_		□aı	m. $\square$ pm.	
Date		Time		
Subject's Street Address		City	County	State
	Signature of Officer		Departi	ment
Distribution: 1. Court – Original				
1. Court – Original	Name Printed or Typed		Teleph	